

# HEREDITARY BREAST AND OVARIAN CANCER IN MICHIGAN

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*Healthy People 2020 Objective: Increase the proportion of women with a family history of breast and/or ovarian cancer who receive genetic counseling*

- Approximately 1 in 9 Michigan women have a significant family history of breast or ovarian cancer.<sup>1</sup>
- Women with a significant family history of breast, ovarian, tubal and/or peritoneal cancer should be referred for genetic counseling and risk assessment by a qualified genetics professional.<sup>2,3,4</sup> Data from Michigan cancer genetics clinics have shown a significant annual increase in the number of patients seen for BRCA counseling and testing.<sup>6</sup>
- However, only 10-30% of Michigan women with a significant family history of breast and/or ovarian cancer have received BRCA counseling.<sup>1</sup>
- Approximately 7,000 Michigan women are diagnosed with breast cancer each year, with approximately 1,500 being diagnosed at a young age (under age 50).<sup>5</sup> Approximately 750 Michigan women are diagnosed with ovarian cancer each year.<sup>5</sup> Women diagnosed with breast cancer at a young age and women diagnosed with ovarian, tubal and/or peritoneal cancer at any age should be referred for cancer genetic services.<sup>3</sup>
- Of Michigan adults received BRCA counseling and testing, 29.4% who had both breast and ovarian cancer tested positive for a known deleterious *BRCA* mutation; 14.0% who had ovarian cancer tested positive for a *BRCA* mutation; and, 7.8% of women with breast cancer at young age tested positive for a *BRCA* mutation.<sup>6</sup>
- Over 57% of young breast cancer survivors in Michigan have not received genetic services, and the top barrier was that no one had ever recommended these services.<sup>7</sup>
- Adults with a first-degree relative with a known *BRCA* mutation have a 50% risk of having the same mutation. Cancer genetic services are strongly recommended for these adults.

1. Michigan Behavioral Risk Factor Survey, Surveillance Brief, November 2013. Breast and ovarian cancer genomics among Michigan women.

2. U.S. Preventive Services Task Force. Recommendation Summary. BRCA-Related Cancer: Risk Assessment, Genetic Counseling, and Genetic Testing. December 2013. Retrieved July 2, 2015. <http://www.uspreventiveservicestaskforce.org/Page/Topic/recommendation-summary/brca-related-cancer-risk-assessment-genetic-counseling-and-genetic-testing>.

3. National Comprehensive Cancer Network Clinical Practice Guidelines in Oncology "Genetic/Familial High-Risk Assessment: Breast and Ovarian" version 2.2015, accessed July 2015 from [www.nccn.org](http://www.nccn.org).

4. American College of Surgeons Commission on Cancer 2012 Patient Care Standards accessed July 2015 from <https://www.facs.org/quality-programs/cancer/coc/standards>.

5. Michigan Resident Cancer Incidence File. Division for Vital Records & Health Statistics, Michigan Department of Health and Human Services.

6. BRCA Clinical Genetic Counseling Database, Michigan Department of Health and Human Services, Division of Genomics, Perinatal Health, and Chronic Disease Epidemiology, Genomics and Genetic Disorders Section, Cancer Genomics Program, June 2015.

7. Anderson, B et al. Barriers and Facilitators for Utilization of Genetic Counseling and Risk Assessment Services in Young Female Breast Cancer Survivors. J Cancer Epidemiology. 2012.